



1/15/09

Practitioner's Docket No. MAKO-12 CONT

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Frederick M. Mako, Robert L. Bruce

Application No.: 10/773,516

Filed: 02/05/04

For: CERAMIC JOINING

**CERTIFICATE OF FIRST CLASS MAILING WITH MAIL STOP (CM-MS) (37 C.F.R.
§ 1.8(a)(i)(1)(A))**

I hereby certify that on January 28, 2009 the following correspondence:

Name of Paper: AMENDMENT TRANSMITTAL

Number of Pages: 2

Fees: Three-month extension Amount: \$555.00 Payment By: Check

Other: AMENDMENT

is being deposited with the United States Postal Service in an envelope addressed to:

Mail Stop Amendment
Commissioner for Patents
PO Box 1450
Alexandria, Virginia, 22313-1450

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Signature

Telephone Number: 412-621-9222

Tracey L. Klaas

Type or print name of person certifying



Practitioner's Docket No. MAKO-12 CONT

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Frederick M. Mako, Robert L. Bruce

Application No.: 10/773,516

Group No.: 1791

Filed: 02/05/2004

Examiner: Melvin C. Mayes

For: CERAMIC JOINING

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is a small entity. A statement was already filed.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for three months:

Fee: \$555.00

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY
CLAIMS			
REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. FEE
TOTAL INDEP.	3 1	20 3	=\$ 26.00 =\$ 110.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM		+\$ 0.00	= \$ 0.00
			TOTAL 02/02/2003 RECEIVED 00000049 10773516 ADDIT. FEE \$ 555.00 01 FC:2253

No additional fee for claims is required.

FEE PAYMENT

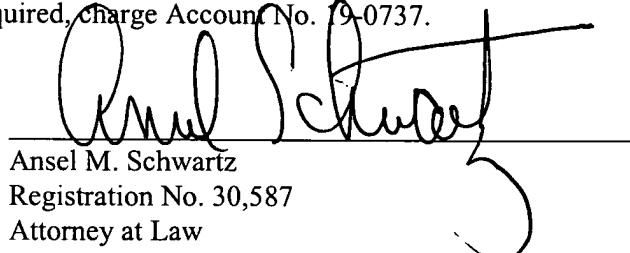
5. Attached is a check in the sum of \$555.00.

A duplicate of this paper is attached.

FEE DEFICIENCY

6. If an additional extension and/or fee is required, charge Account No. 19-0737.

If an additional fee for claims is required, charge Account No. 19-0737.



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